obligations

Political Committee REPORT OF RECEIPTS AND DISBURSEMENTS 2010 Judicial Election

IIIN 1 0 2010 Committee to Elect Dara Skinner Name of Committee Campaign Finance MS 39505 P.O. Box 10256, Gulfport, Address Secretary of State (228) 831-1319 (228) 860-5494 Telephone Fax DATE STANKE Email daraskinner@bellsouth.net Helen Frazer Treasurer Check here if above is different from previous report TYPE OF REPORT November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).......Runoff Candidates Termination Report (Candidate will no longer accept contributions or make campaign Required to terminate reporting expenditures and has no outstanding campaign debt obligation)

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- The receiving authority must be in actual receipt of the required reports by 5:90 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Nor	n-itemized =	This Period		Calendar Year-To-Date
Total amount of contributions	\$ 2896.23+\$	0	\$ 2896.23	\$	2896.23
Total amount of disbursements	\$ 2713.4 \}	182.82	\$ 2896.23	\$	2896.23
Total amount of cash on hand			\$ 0	\neg	
I certify that I have examined thi	s report and to th	e best of my k	nowledge and belief it i		
Signature of Director or	Treasurer		Date		

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements. Penalties: Fallure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, mutil-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

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Name of Candidate or Committee Committee to Elect Dara Skinner

Reporting period 5/1/2010 through 5/31/2010

ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual XM_oan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Dara Skinner		\$
Mailing Address 13281 Three Rivers Road		\$
City, State, Zip Code Gulfport, MS 39503		\$
Name of Employer (Required) self-employed		\$
Occupation (Required) attorney	Aggregate year-to-date	\$ 2896.23
B. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)	11	\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	11	\$
Mailing Address	11	\$
City, State, Zip Code		\$
Name of Employer (Required)	11	\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	11	\$
Mailing Address		\$
City, State, Zip Code		\$
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	\$

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Name of Candidate or Committee Committee to Elect Dara Skinner

5/1/2010 Reporting period

through

5/31/2010

ITEMIZED DISBURSEMENTS

U.S. Postal Service	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address Highway 49		S
City, State, Zip Code Gulfport, MS 39503		s
Purpose of Disbursement (Optional) postage	Aggregate Year-to-date	\$ 330.16
B. Full name The Home Depot	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 15220 Creosote Road		\$
City, State, Zip Code Gulfport, MS 39503		s
Purpose of Disbursement (Optional) sign materials	Aggregate Year-to-date	\$ 310.09
C. Full name Office Depot	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 15212 Crossroads Parkway		\$
City, State, Zip Code Gulfport, MS 39503		S
Purpose of Disbursement (Optional) mailout materials	Aggregate Year-to-date	\$ 297.65
D. Full name Build A Sign	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 11525-B Stonehollow Drive		S
City, State, Zip Code Austin, TX 78758	//_	S
Purpose of Disbursement (Optional) signs	Aggregate Year-to-date	s _{1775.51}
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code	//	s
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	_/_/_	\$
City, State, Zip Code		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	s